

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Hudson for Congress

A. Full Name (Last, First, Middle Initial)
James F. Link DVM

Mailing Address **PO Box 67**

City New London	State NC	Zip Code 28127-0067
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FEC ID number of contributing federal political committee. **C**

Name of Employer North Stanly Animal Clinic	Occupation Veterinarian/Owner
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Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **500**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2013

Transaction ID : A-CF4144

Amount of Each Receipt this Period

500

B. Full Name (Last, First, Middle Initial)
James Allen Lee III

Mailing Address **4424 Gilboa Road**

City Marshville	State NC	Zip Code 28103-8092
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Attorney
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Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **500**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2013

Transaction ID : A-CF4093

Amount of Each Receipt this Period

500

C. Full Name (Last, First, Middle Initial)
Carlton D. Dial

Mailing Address **PO Box 836**
3986 Prospect Road

City Pembroke	State NC	Zip Code 28372-0836
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FEC ID number of contributing federal political committee. **C**

Name of Employer Dial's Insurance	Occupation Agent
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Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **500**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		25		2013

Transaction ID : A-CF4220

Amount of Each Receipt this Period

500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00
